



Department of the Interior  
U.S. Fish and Wildlife Service

Expires September 30, 2007  
OMB No. 1018-0094

Federal Fish and Wildlife Permit Application Form

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Type of Activity:

Endangered Species - USFWS  
P.O. Box 25486, DFC  
Denver, CO 80225-0486

Native Endangered & Threatened Species –  
Enhancement of Survival Permits Associated with Safe Harbor Agreements  
& Candidate Conservation Agreement with Assurances

Complete sections A, OR B, and C, on this page, plus the attached pages of this application. Application will not be considered complete without all sections. See additional instructions on attached pages.

<b>A.</b>		<b>Complete if applying as an individual</b>							
1 a Last name		1 b First name		1 c Middle name or initial		1 d Suffix			
2 a Street address (line 1)		2 b Street address (line 2)		2 c Street address (line 3)					
3 a City		3 b Province		3 c State		3 d Zip code/Postal code:		3 e Country	
4 Date of birth (mm/dd/yyyy)		5 Social Security No		6 Occupation		7 a Home telephone number			
7 b Work telephone number		7 c Fax number		8 E-mail address				9 County	
10 List any business, agency, organizational, or institutional affiliation associated with the wildlife or plants to be covered by this permit (see C 1)						11 Doing business as (dba)			

<b>B.</b>		<b>Complete if applying as a business, corporation, public agency or institution</b>							
1 a Name of business, agency, or institution Montana Department of Fish, Wildlife & Parks				1 b Doing business as (dba)					
2 a Street address (line 1) 1420 East 6th Ave		2 b Street address (line 2) PO Box 200701		2 c Street address (line 3)					
3 a City Helena		3 b Province		3 c State MT		3 d Zip code 59620-0791		3 e Country USA	
4 Tax identification no 81-0302402		5 Describe the type of business, agency, or institution and provide state of incorporation State fish & wildlife agency							
6 a Principal officer (President, director, etc) Last name Hagener		6 b First name M. Jeff		6 c Middle name or initial			6 d Suffix		
7 Principal officer title: Director				8 Home telephone number					
9 Work telephone number 406-444-3186		10 Fax number 406-444-4952		11 E-mail address jhagener@mt.gov			12 County Lewis & Clark		

<b>C.</b>		<b>All applicants complete</b>	
1 Do you currently have or have you had any Federal Fish and Wildlife permits? (For simplification, all licenses, permits, registrations, and certificates will be referred to as a permit.) Yes <input checked="" type="checkbox"/> If yes, list the number of the most current permit you have held: _____ No <input type="checkbox"/>			
2 Have you obtained all required State, Federal, or foreign government approval(s) to conduct the activity you propose? Yes <input type="checkbox"/> If yes, provide a copy of the approval(s) Have applied <input type="checkbox"/> Not required <input checked="" type="checkbox"/>			
3 Enclose check or money order payable to the U.S. FISH AND WILDLIFE SERVICE in the amount of \$25 [50 CFR 13.11(d)(2)] Institutions which qualify under 50 CFR 13.11(d)(3) may be exempt from the application processing fee			
4 Certification: I hereby certify that I have read and am familiar with the regulations contained in Title 50, Part 13, of the Code of Federal Regulations and the other applicable parts in subchapter B of Chapter I of Title 50, and I certify that the information submitted in this application for a permit is complete and accurate to the best of my knowledge and belief. I understand that any false statement herein may subject me to the criminal penalties of 18 U.S.C. 1001			
5 Signature (in blue ink) of applicant/person responsible for permit in Section A or B (Photocopied signatures are not accepted) 		6 Date (mm/dd/yyyy): 3/31/05	

## Enhancement of Survival Permit Application

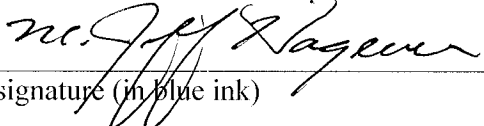
### Certification Notice

The same person who signs in box C.6 on page 1 of the application should sign (in blue ink) the following certification.

By submitting this application and receiving an Enhancement of Survival permit pursuant to Section 10(a)(1)(A) of the Endangered Species Act, I

M. Jeff Hagener \_\_\_\_\_ (print name (s))

attest that I/we own the lands indicated in this application, or have sufficient authority or rights over these lands to implement the measures of the Safe Harbor Agreement and/or Candidate Conservation Agreement with Assurances covered by the Enhancement of Survival permit. Further, upon receipt of the Enhancement of Survival permit, I/we agree to conduct the activities as specified in the Safe Harbor Agreement and/or Candidate Conservation Agreement with Assurances according to the terms and conditions of the Enhancement of Survival permit and its supporting documents.

  
signature (in blue ink)

3/31/05  
date

M. Jeff Hagener  
please print name legibly

\_\_\_\_\_  
signature (in blue ink)

\_\_\_\_\_  
date

\_\_\_\_\_  
please print name legibly

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The public reporting burden for completing this application is estimated to be 3 hours, including time for reviewing instructions, gathering and maintaining application data, and completing and reviewing the forms. Comments regarding the burden estimate or any other aspect of the reporting requirement(s) should be directed to the Service Information Collection Clearance Officer, MS 222 ARLSQ, Fish and Wildlife Service, Washington, DC 20240.

An agency may not conduct and a person is not required to respond to a collection of information unless a currently valid OMB control number is displayed.